

SEFA Notification of Hazardous Waste Site

United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981

Please type or print in ink If you need additional space, use separate sheets of paper Indicate the letter of the item which applies

	sation, and Liability Act of 1980 and must be mailed by June 9, 1981	which applies	810609		
<u></u>			W # 79 MU	<u> NS-000</u>	-001-142
A	Person Required to Notify:	Name (7, +4	at Mucau	EAU	
	Enter the name and address of the person or organization required to notify		1xy 10 - 272		
		CAY MUSAH	У Б <u>Н.2</u> S	tate /i/w Z	10 Code 56560
В	Site Location:	- M	-heartransfe	C+ 1	
	Enter the common name (if known) and	Name of Sito / O O	-		IUN
	actual location of the site	Street 2727	HWY 10 EA	ts.L	
W/	ND99060 9747	City Machaga County - State MN. Zip Code 56560			
$\frac{c}{m}$	Person to Contact:		4		
Ç	Enter the name, title (if applicable), and	Name (Last, First and Title)	- Hickness.	Leo - +	5 u p
	business telephone number of the person	Name (Last, First and Title) Highness, Leo-Sup Phone 219-199-5464			
	to contact regarding information submitted on this form.	1110112477- 447-	767		
_ D	Dates of Waste Handling:				·
	Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site				•
	Place an X in the appropriate boxes The categories listed overlap Check each applicable category 1. ② Organics 2. ③ Inorganics 3. ② Solvents 4. ② Pesticides 5. ② Heavy metals 6. ② Acids 7. ② Bases 8. ② PCBs 9. ② Mixed Municipal Waste 10. ② Unknown 11. ② Other (Specify) 12. ② T 13. ② U 14. ② S 15. ② P	source categories If or sources, you are Description of Site. of Waste: n X in the appropriate	Option 2. This option is a Resource Conservation and regulations (40 CFR Part 2). Specific Type of Waste. EPA has assigned a four-listed in the regulations of appropriate four-digit number the list of hazardous wast contacting the EPA Region located.	digit number to einder Section 30 inber in the boxes tes and codes can serving the Sta	(RCRA) Section 3001 each hazardous waste 01 of RCRA Enter the s provided A copy of n be obtained by
	17 ව් 18 ව	Inknown Other (Specify)		•	

Form Approved OMB No 2000-0138 PA Form 8900-1

JUN 1 1 1981

	Notification of Hazardous Waste Site	Side Two				
F	Waste Quantity	Facility Type	Total Facility Waste Amount			
	Place an X in the appropriate boxes to indicate the facility types found at the site	1 🗆 Piles	gallons Total Facility Area square feet			
	In the "total facility waste amount" space	2 ☑ Land Treatment 3 ☐ Landfill				
	give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons. In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.	4 🗆 Tanks				
		5 Impoundment				
		6 🗆 Underground Injection 7 🗅 Drums, Above Ground	acres			
		8 @ Drums, Below Ground				
		9 P Other (Specify) Gurne	ng			
G	Known, Suspected or Likely Releases to the Environment:					
	Place an X in the appropriate boxes to indicate any known, suspected, Conflikely releases of wastes to the environment					
	Note. Items Hand I are optional Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so					
H	Sketch Map of Site Location: (Option	nal)				
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site Place an X on the map to indicate the site location Draw an arrow showing the direction north You may substitute a	J				
	publishing map showing the site location					
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ı	Description of Site: (Optional)					
	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from Provide any other information or comments which may help describe the site conditions.					
		•				
_			···			
J	Signature and Title:	01 + 11 .				
	The person or authorized representative (such as plant managers, superintendents,	Name Coly of MUCK	50.			
	trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing	Street 1001 Conter 1	Owner, Past			
			T 0 D			
	notification, the signature is optional Check the boxes which best describe the	CIN MONAMENT State A	<u> </u>			
	relationship to the site of the person	Signature Similar & Vand	Other			
	required to notify. If you are not required to notify check "Other"		O a to			

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	RESPOND	ENT CONTACT RE	cond (ncn)		•			
	PACILITY	וט אטואשנוז		COMPANY NAME		. 11.		
•				City, or	· 22	on h	end	~~
	CONTACT PERSON'S NAME/TITLE			STATE ABUREV. ZIP CODS				
				•	•	TELEPHONE NU	MDER (INCLUDE	ANI.A CODE)
		•	•	-	• •			
			••	CONTACT RECORD)			
• •	DATE	CONTRACTOR'S	ITEMS DISCUSSED/RESOL	UTION				
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